



<b>TRANSMITTAL FORM</b> <small>(to be used for all correspondence after initial filing)</small>	Application Number	101600, 904	
	Filing Date	6-20-03	
	First Named Inventor	Robert Sigurd Nelson	
	Art Unit	2882	
	Examiner Name	Irakli Kiknadze	
Total Number of Pages in This Submission	3	Attorney Docket Number	

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
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<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
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<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input checked="" type="checkbox"/> Response to Missing Parts/Incomplete Application	<b>Remarks</b> 1. Cover sheet: select claims 57-59. Cancel claims 1-56.  2. copy of original cover sheet from 6-20-03.	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual name	Robert Sigurd Nelson	
Signature	Robert Sigurd Nelson	
Date	1-08-2003	

CERTIFICATE OF TRANSMISSION/MAILING		
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.		
Typed or printed name	Robert Sigurd Nelson	
Signature	Robert Sigurd Nelson	Date 1-08-2003

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TO:  
US Patent Office  
Examiner: Irakli Kiknadze  
Phone: 703-305-6464  
Fax No: 703-308-7722



Date: 1-08-2004

FROM:  
Robert Sigurd Nelson  
2922 Upshur Street  
San Diego, CA 92106  
Phone: 619-594-1013  
Fax. No. 619-222-1720

Subject: Application No. 10/600,904.  
Dear Mr. Kiknadze,

Three Divisional applications were filed during June of 2003:

1. Group 2 (Application No. 10/461,242). Examiner Bernard Souw.
2. Group 3 (Application No. 10/461,241). Examiner Otilia Gabor.
3. Group 7 (Application No. 10/600,904). Claims (57-59). Examiner Irakli Kiknadze.

Please find enclosed a copy of the original cover sheet for the Divisional application (Group 7: Claims 57-59) that was post-marked June 20, 2003. One correction is necessary for the original cover sheet. The phrase "All other claims (1-56) should be ignored" should be corrected to say "Claims 1-56 should be canceled".

The source of the confusion appears to be that the cover sheets for Group 2 and Group 7 Divisionals were lost. The day after you called me (12-04-03) Examiner Souw called me with the same problem. Days later I called him and faxed a copy of the original cover sheet (submitted June 13, the same day I submitted the Group 3 divisional). I apologize for my lack of follow-through.

Sincerely,

Robert Sigurd Nelson  
Robert Sigurd Nelson

Date January 8, 2004